

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	DANIEL SUISA
Title	System and Method for the Generation and Verification of Signatures Associated with Hardcopy Documents
Group Art Unit	
Examiner Name	
Attorney Docket No.	FP1972

I hereby appoint:

☒ Practitioners at Customer Number 35889
Customer Number

OR

☐ Practitioner(s) named below:

Customer Number Bar Code

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number
Customer Number

OR

Customer Number Bar Code

☒ Firm or
Individual Name

Lloyd Wise

Address

City

State

Zip

Country

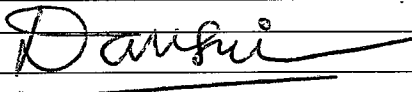
Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record

Name	DANIEL SUISA
Signature	
Date	August 20, 2003
Name	
Signature	
Date	
Name	
Signature	
Date	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below*.

☒ *Total of 1 forms are submitted.